

Sponsor Letterhead

Serious Deficiency Process

Letter H: Notice of Combined Serious Deficiency, Suspension, Proposed Termination, and Proposed Disqualification: Imminent Threat to Health and Safety

Date

Provider's Name

Provider's Street Address

Provider's City, State, Zip code

Licensed/Unlicensed Provider Number/Sponsor Assigned Provider Number

Provider's Date of Birth

Certified Return Receipt #

Notice of Serious Deficiency, Proposed Suspension, and Proposed Termination and Disqualification

Dear [Provider]:

This letter is being sent via [certified mail, return receipt (or the equivalent private delivery service), by facsimile or by e-mail address and regular mail]. It will be considered delivered five days from the date it is mailed. [Sponsor] has a responsibility to the United States Department of Agriculture (USDA) and the Michigan Department of Education (MDE) to properly monitor child care providers to ensure compliance with the regulations and requirements of the Child and Adult Care Food Program (CACFP).

Serious Deficiency Determination

Based on the [review/parent contact/DHS Order of Summary Suspension and Notice of Intent to Revoke and date], [Sponsor] has determined that you are seriously deficient in your operation of the CACFP. [List serious deficiency(ies)] The determination of serious deficiency cannot be appealed.

Suspension

The serious deficiency(ies) identified is the imminent threat to the health or safety of CACFP participants or the public. Because of this imminent risk, [Sponsor] is suspending your CACFP participation, including all program payments. This action is being taken pursuant to 7 CFR 226.16(l)(4) and will take effect on [date of this letter]. The suspension cannot be appealed.

Proposed Termination and Proposed Disqualification

Because of the seriousness of this/these deficiency(ies), [Sponsor] is also:

- Proposing to terminate your agreement to participate in the CACFP for cause effective [date].
- Proposing to disqualify you from future CACFP participation effective [date].

[The effective date for the disqualification should be the same as the agreement termination date, and not earlier; otherwise, the provider could be disqualified and ineligible to participate before the agreement is terminated.]

In addition, if you voluntarily terminate your agreement after receiving this notice, we will propose to disqualify you from future CACFP participation. If disqualified, you will be placed on the National Disqualified List (NDL). While on the list, you will not be able to serve as a principal in any institution or facility or as a day care home provider in the CACFP for seven years. However, if any debt relating to the serious deficiency(ies) has/have not been repaid, you will remain on the NDL until the debt has been repaid.

Appeal of Proposed Termination and Proposed Disqualification

You may appeal the proposed termination of your agreement for cause and your proposed disqualification. A copy of the appeal procedures is enclosed. If you decide to appeal the proposed actions, you must follow the appeal procedures exactly as they are written as failure to do so may result in the denial of your request for an appeal.

The suspension will remain in effect during the period of any appeal. However, if you request an appeal and the Hearing Official overturns the proposed termination and proposed disqualification, any valid claims for meals served by you for the period of the suspension will be paid.

If you appeal the proposed termination and the proposed disqualification, the proposed action will not take effect until the Hearing Official issues a decision on the appeal. If you do not make a timely request for an appeal, your agreement will be terminated for cause on [date] and you will be disqualified from future CACFP participation effective [date] and placed on the National Disqualified List.

Please contact [staff name, title] at [phone number] if you have any questions or require any additional information.

Sincerely,

cc: Michigan Department of Education
Michigan Department of Human Services, Bureau of Child and Adult Licensing
Provider file

Enclosure: Appeal Procedures